

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MV	06106101	
O.I.P.E. CLASSIFIER	M	5-2-01	
FORMALITY REVIEW	TM	JCB6N	5/10/01
RESPONSE FORMALITY REVIEW	Request	925	08-15-01

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 — (Through numeral)... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final Original	
1 1	✓ =
2 2	
3 3	
4 4	
5 5	✓
48 6	○
49 7	○
50 8	○
51 9	✓
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Claim	Date
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53 57	✓ =
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If more than 150 claims or 10 actions
staple additional sheet here

10/10/01
C5/10/01

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